

# CLAIMS ONLY

SERIAL NO. \_\_\_\_\_ FILING DATE \_\_\_\_\_

APPLICANT(S) \_\_\_\_\_

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*	*	*	*
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
	1								51		
2							52				
3							53				
4							54				
5							55				
6							56				
7	1						57				
8		1					58				
9	1						59				
10		1					60				
11							61				
12							62				
13							63				
14							64				
15							65				
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40							90				
41							91				
42							92				
43							93				
44							94				
45							95				
46							96				
47							97				
48							98				
49							99				
50							100				
TOTAL IND.	1		1		1		TOTAL IND.		1		1
TOTAL DEP.	1	1	1	1	1	1	TOTAL DEP.		1	1	1
TOTAL CLAIMS	10		10		10		TOTAL CLAIMS		10		10

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS